

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. **10/019852** FILING DATE

APPLICANT(S)

8/20/85

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3	2					
4	1					
5	1					
6	2					
7	1					
8	1					
9	1					
10	1					
11	2					
12	1					
13	1					
14	1					
15	3					
16	1					
17	1					
18	1					
19	3					
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50						
TOTAL IND.	10		5			
TOTAL DEP.	16		10			
TOTAL CLAIMS	26		15			

*	*	*	*
IND.	DEP.	IND.	DEP.
51			
52			
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99			
100			
TOTAL IND.			
TOTAL DEP.			
TOTAL CLAIMS			

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

Barbara Campbell
National Stage Processing
(703) 305-3331

FORM PTO-1380 (REV. 3-78)

U.S. DEPARTMENT OF COMMERCE
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